

Patent Application No. 09/469,399

#12C
M.M.
6/5/03**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE****In re Application of:** Edgren et al.**Serial No.:** 09/469,399**Filed:** 12/22/99**For:** Gastric Retention Dosage Form Having Multiple Layers**Examiner:** E. Choi**Group Art Unit:** 1616**Attorney Docket No.:** ARC2885R1**CERTIFICATION OF FACSIMILE TRANSMISSION**

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May 21, 2003
Date of Facsimile


Signature of registered practitioner or other person having reasonable basis to expect facsimile transmission to occur on date of deposit shown pursuant to 37 C.F.R. § 1.8(a)(1)(ii)

Samuel E. Webb
Typed/printed name of person whose signature is contained above

AMENDMENT**Commissioner for Patents**
Washington, D.C. 20231**Sir:**

The following amendments and remarks are filed in response to the Examiner's remarks in the Office Action mailed November 21, 2002, the three-month shortened statutory period for response to which expired on February 21, 2003. A petition and fee for a three-month extension of time for response are filed simultaneously herewith.

PTO/SB/21 (05-03)

Approved for use through 04/30/2003, OMB 0651-0031
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/469,399	
	Filing Date	December 22, 1999	
	First Named Inventor	David E. Edgren	
	Art Unit	1616	
	Examiner Name	Frank I. Choi	
Total Number of Pages in This Submission	16	Attorney Docket Number	ARC 2885 R1

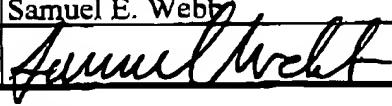
ENCLOSURES (Check all that apply)			
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Remarks <div style="border: 1px solid black; height: 100px; width: 100%;"></div>

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Samuel E. Webb, ALZA CORPORATION c/o Johnson & Johnson		
Signature			
Date	May 21, 2003		

CERTIFICATE OF TRANSMISSION/MAILING

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Typed or printed name	Samuel E. Webb		
Signature			
	Date	05/21/2003	

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (05-03)

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FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 930.00)

Complete If Known

Application Number	09/469,399
Filing Date	December 22, 1999
First Named Inventor	David E. Edgren
Examiner Name	Frank I. Choi
Art Unit	1616
Attorney Docket No.	ARC 2885 R1

METHOD OF PAYMENT (check all that apply)

 Check Credit card Money Order Other None Deposit Account:

Deposit Account Number	10-0750
Deposit Account Name	Johnson & Johnson

The Commissioner is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments

Charge any additional fee(s) during the pendency of this application

Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1001 750	2001 375	Utility filing fee	
1002 330	2002 165	Design filing fee	
1003 520	2003 280	Plant filing fee	
1004 750	2004 375	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
SUBTOTAL (1) (\$)			

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Independent Claims	Multiple Dependent	Extra Claims	Fee from below	Fee Paid
			-20** =		
			- 3** =		

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
1202 18	2202 9	Claims in excess of 20
1201 84	2201 42	Independent claims in excess of 3
1203 280	2203 140	Multiple dependent claim, if not paid
1204 84	2204 42	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2) (\$)		

** or number previously paid, if greater; For Reissues, see above

3. ADDITIONAL FEES

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 65	Surcharge - late filing fee or oath	
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
1053 130	1053 130	Non-English specification	
1812 2,520	1812 2,520	For filing a request for ex parte reexamination	
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action	
1251 110	2251 55	Extension for reply within first month	
1252 410	2252 205	Extension for reply within second month	
1253 930	2253 485	Extension for reply within third month	
1254 1,450	2254 725	Extension for reply within fourth month	
1255 1,970	2255 985	Extension for reply within fifth month	
1401 320	2401 160	Notice of Appeal	
1402 320	2402 180	Filing brief in support of an appeal	
1403 280	2403 140	Request for oral hearing	
1451 1,510	1451 1,510	Petition to institute a public use proceeding	
1452 110	2452 55	Petition to revive - unintentional	
1453 1,300	2453 650	Petition to revive - involuntary	
1501 1,300	2501 650	Utility issue fee (or reissue)	
1502 470	2502 235	Design issue fee	
1603 630	2503 315	Plant issue fee	
1480 130	1480 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR 1.17(q)	
1808 180	1808 180	Submission of Information Disclosure Stmt	
8021 40	8021 40	Recording each patent assignment per property (times number of properties)	
1809 750	2809 375	Filing a submission after final rejection (37 CFR 1.129(e))	
1810 750	2810 375	For each additional invention to be examined (37 CFR 1.129(b))	
1801 760	2801 375	Request for Continued Examination (RCE)	
1802 900	1802 900	Request for expedited examination of a design application	
Other fee (specify)			
*Reduced by Basic Filing Fee Paid		SUBTOTAL (3) (\$)	930.00

(Complete if applicable)

Name (Print/Type)	Signature	Registration No. (Attorney/Agent)	Telephone	Date
Samuel E. Webb	<i>Samuel E. Webb</i>	44,394	650-564-5106	May 21, 2003

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CONFIDENTIAL FAX

TO:	Examiner Frank Choi Art Unit 1616	FROM:	Samuel Webb ALZA Corporation
FAX:	(703) 308-4556	FAX:	(650) 564-2195
TEL:	(703) 308-0067	TEL:	(650) 564-5106
		PAGES:	17 (including cover)

Date: March 21, 2003

469 399

FAX RECEIVED

MAY 22 2003

Re: United States Patent Application Serial No. 09/469,399

GROUP 1600

OFFICIAL

Dear Examiner Choi:

Attached hereto is an Amendment (13 pages) in response to an Office Action outstanding in the referenced application. Accompanying the amendment are a Transmittal Form (1 page), a Fee Transmittal (1 page), and a Petition for Extension of Time (1 page).

Very truly yours,

Samuel Webb
Patent Attorney